## **COUNTY OF SAN DIEGO EMERGENCY MEDICAL SERVICES**

# **2013 EMERGENCY MEDICAL SERVICES** SYSTEM REPORT

#### **San Diego County Facts** 2013

**Population** - 3,150,178

- Female 50%
- Male 50%

Square Miles - Over 4,200

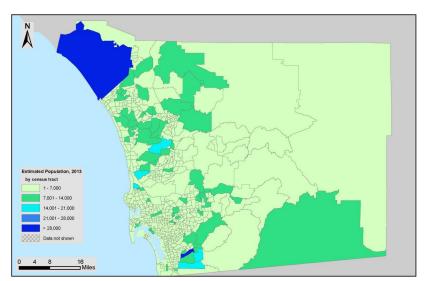
#### Agencies - 67 agencies

- Advanced Life Support (ALS) 37
- Basic Life Support (BLS) 28
- Air Ambulance 2

#### **Hospitals**

- Emergency Departments 20
- Base Hospitals 7
- Trauma Centers 6
- STEMI Receiving Centers 13
- Stroke Receiving Centers 16

### 2013 San Diego County Population by Census Tract



Population estimates 2011-2013, San Diego Association of Governments (SANDAG) Maps/Analysis by County of San Diego, Emergency Medical Services Contact Isabel Corcos, Leslie Ray 619.285.6249. Map Date: August, 2014

WHHSA SANGIS





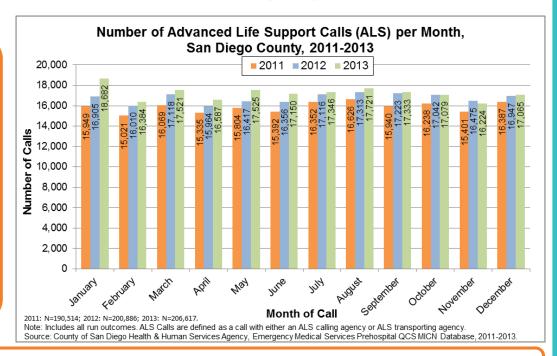
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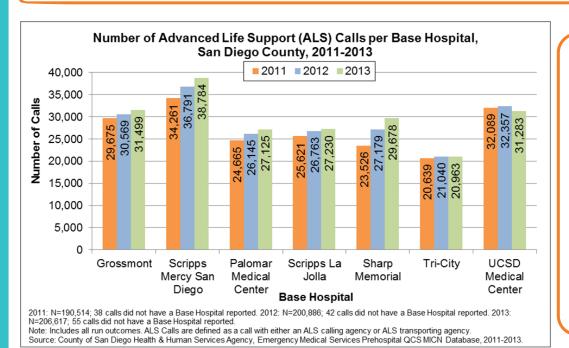




In 2013, there were 206,617 ALS calls made in San Diego County; an 8.5% increase (16,103 more calls) in ALS calls from 2011.

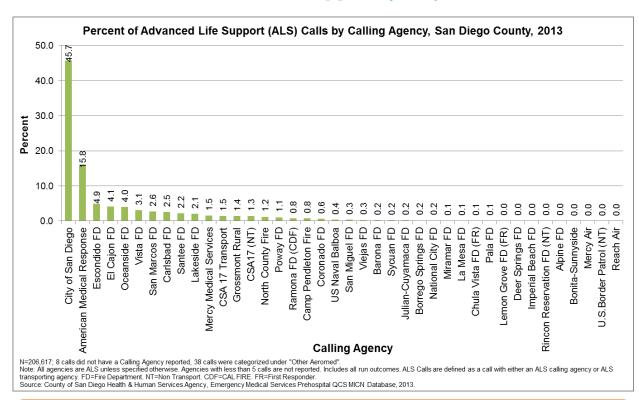


On average, there were 17,218 ALS calls per month, and 566 calls per day, in 2013. The most ALS calls occurred in January, while the least occurred in November.

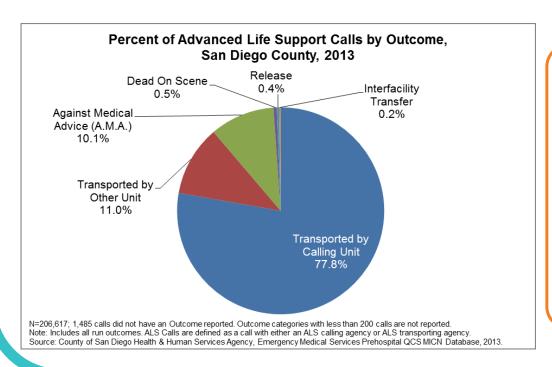


In 2013, there were 5,731 more ALS calls answered by a San Diego County Base Hospital than in 2012.

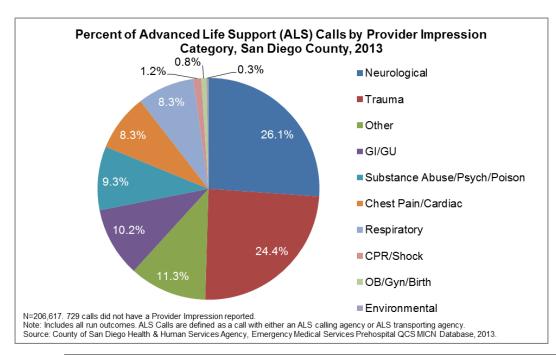
The distribution of ALS calls among the San Diego County Base Hospitals ranged from 10.1% to 18.8%, in 2013.



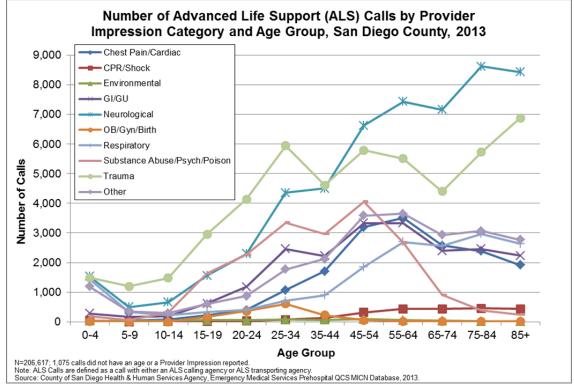
In 2013, the distribution of ALS calls among calling agencies ranged from 45.7% to less than 1.0%.



In 2013, 89% of ALS calls resulted in patient transport to an emergency department. Ten percent of ALS calls resulted in the patient refusing transport (A.M.A.). ALS call outcomes in 2013 were nearly identical to 2011 and 2012.



In 2013, more than one fourth of ALS calls were neurological related, and another 24.4% were trauma related.



In 2013, there were 716 more neurological related ALS calls among the 65-74 year old age group than in 2012. This was the largest increase among age group and Provider Impression categories between 2012 to 2013.

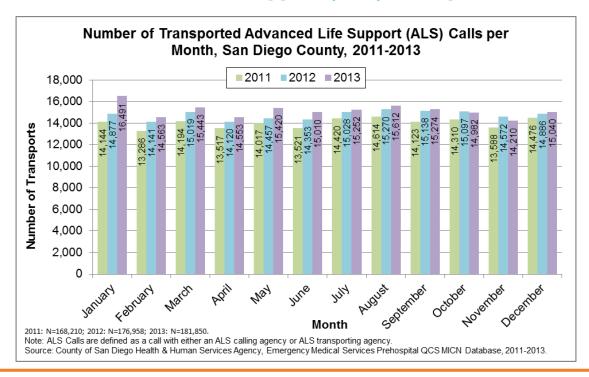
Leading Provider Impression Categories by Age Group in San Diego County, 2013					
Age Group					
0-14	15-24	25-64	65+	Total	
Trauma 4,162	Trauma 7,095	Neurological 22,917	Neurological 24,201	Neurological 53,678	
Neurological 2,697	Substance Abuse/ Psych/Poison 3,917	Trauma 21,846	Trauma 16,998	Trauma 50,101	
Respiratory 1,991	Neurological 3,863	Substance Abuse/ Psych/Poison 13,049	Other 8,766	Other 23,183	
Other 1,826	GI/GU 1,800	GI/GU 11,347	Respiratory 8,163	GI/GU 20,875	
GI/GU 636	Other 1,465	Other 11,126	GI/GU 7,092	Substance Abuse/ Psych/Poison 19,079	
Substance Abuse/Psych/Poison 571	Respiratory 736	Chest Pain/Cardiac 9,490	Chest Pain/Cardiac 6,871	Chest Pain/Cardiac 17,110	
Chest Pain/Cardiac 128	Chest Pain/Cardiac 621	Respiratory 6,165	Substance Abuse/ Psych/Poison 1,542	Respiratory 17,055	
Environmental 91	OB/Gyn/Birth 524	CPR/Shock 956	CPR/Shock 1,329	CPR/Shock 2,386	
CPR/Shock 60	Environmental 118	OB/Gyn/Birth 914	Environmental 67	OB/Gyn/Birth 1,509	
OB/Gyn/Birth	CPR/Shock 41	Environmental 290	OB/Gyn/Birth 49	Environmental 566	

N=206,617; 1,075 calls did not have an age or a Provider Impression reported.

Note: ALS Calls are defined as a call with either an ALS calling agency or ALS transporting agency.

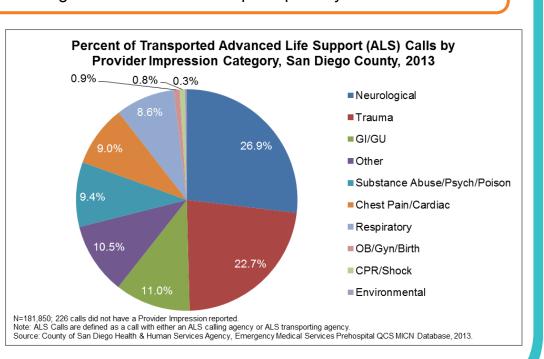
Source: County of San Diego Health & Human Services Agency, Emergency Medical Services Prehospital QCS MICN Database, 2013.

In 2013, overall, there were nearly 2,650 more neurological related ALS calls than in 2012, and it remained the leading Provider Impression (PI) category. Among the 15-24 year age group, the substance abuse/psych/poison related PI category moved from the 3rd leading PI category in 2012 to the 2nd leading PI category in 2013. Otherwise, the rankings remained the same from 2012 to 2013.

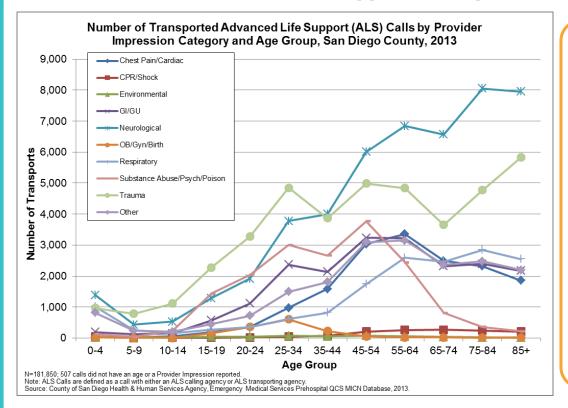


In 2013, there were 181,850 ALS calls that were transported in San Diego County. This accounts for a 8.1% increase (13,640 more transports) in ALS transports since 2011. The average number of ALS transports per day in 2013 was 498.

In 2013,
neurological
related ALS
transports were
the most
common,
followed closely
by trauma related
ALS transports.
This was
consistent with
the transports in
2011 and 2012.

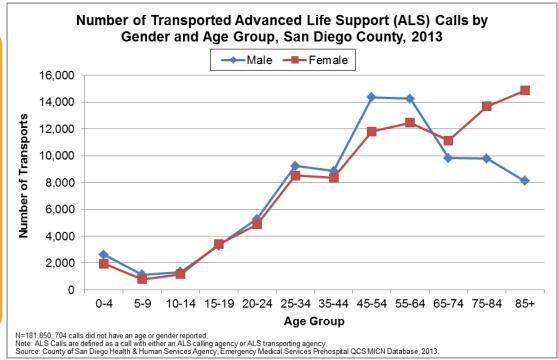


# **Prehospital System Overview - Advanced Life Support Transports**



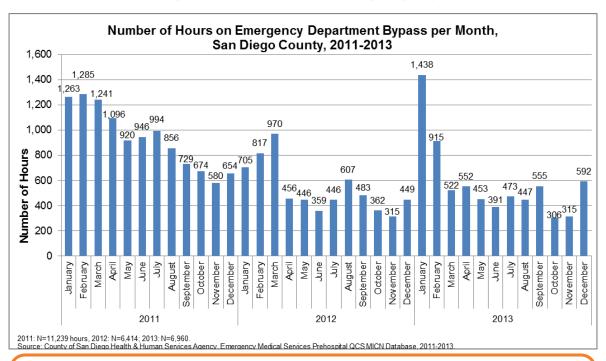
Similar to ALS calls, the largest increase in **ALS** transports occurred among the neurological related transports for the 65-74 year old age group. There was an increase of 628 transports among this group from 2012 to 2013.

In 2013, there were 700 more ALS transports among 65-74 year old males than there were in 2012. Similarly, there were 647 more transports among 65-74 year old females compared to 2012.

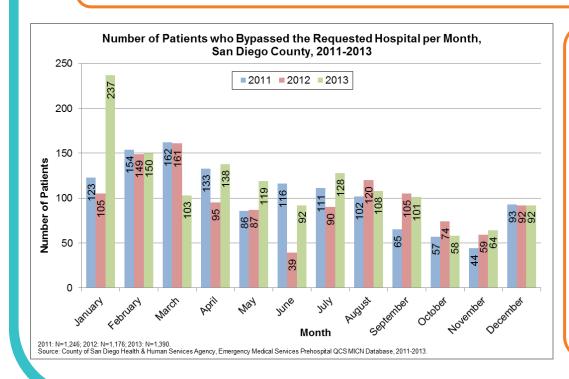


In 2013, the female 85+ year old age group had the most ALS transports, followed closely by the male 45-54 year old and male 55-64 year old age groups.

### Prehospital System Overview - Emergency Department (ED) Bypass



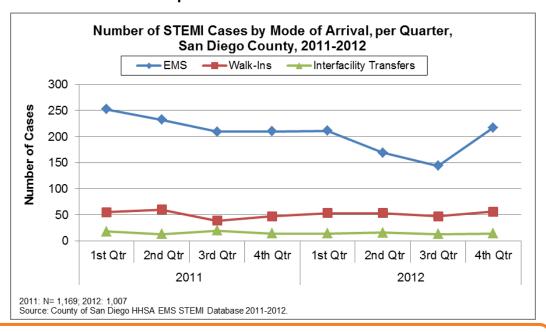
In 2013, the most number of hours spent on bypass occurred in January, while the least occurred in October. The average number of hours on ED Bypass per month in 2013 was 580.0 compared to 534.5 in 2012. The total number of hours on ED Bypass per year increased by 8.5% from 2012 to 2013.



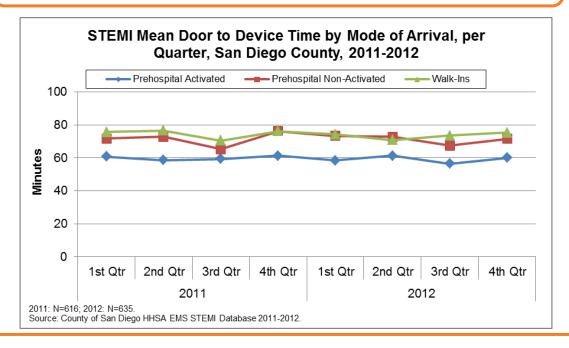
In 2013, 1,390 patients bypassed the requested hospital; an increase of 18.2% from 2012. On average, there were 116 patients bypassed each month in 2013, compared to 98 in 2012.

### **Prehospital System Overview - STEMI**

STEMI data for 2013 is currently pending. The following information will be updated once it is available.



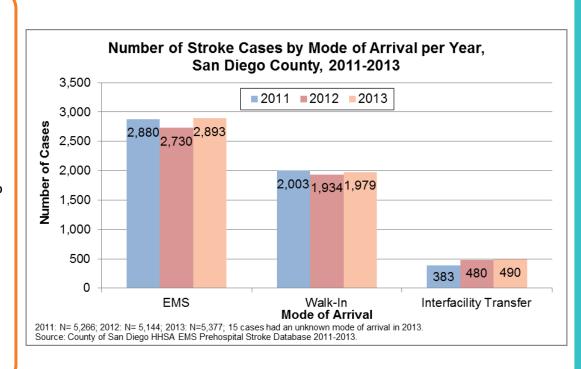
Overall, there were slightly fewer STEMI cases in 2012 than 2011. However, the percent of cases that arrived via Emergency Medical Services (EMS) was similar in both years (77.2% in 2011 and 73.6% in 2012).

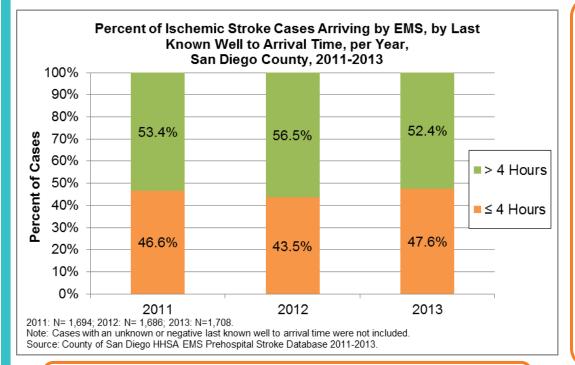


The overall mean DTDT was 59.1 minutes for STEMI cases that were activated by the prehospital system, 71.3 minutes for cases that were not activated, and 73.5 minutes for walk-in cases in 2012. These times were all slightly less compared to 2011.

### **Prehospital System Overview - Stroke**

In 2013. 5,377 stroke cases were treated at a designated Stroke Receiving Center. Of these, 53.8% arrived by **Emergency** Medical Services (EMS), similar to 2011 and 2012.

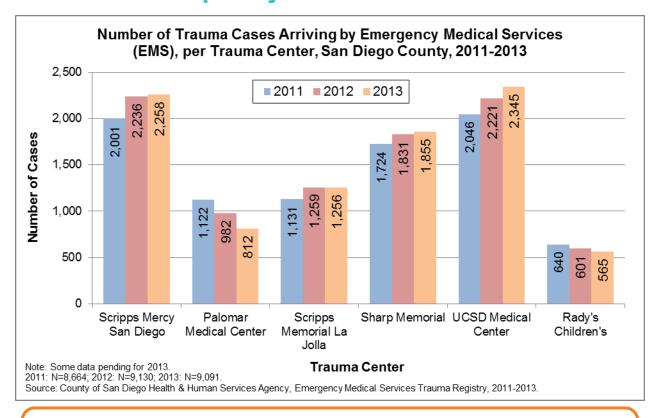




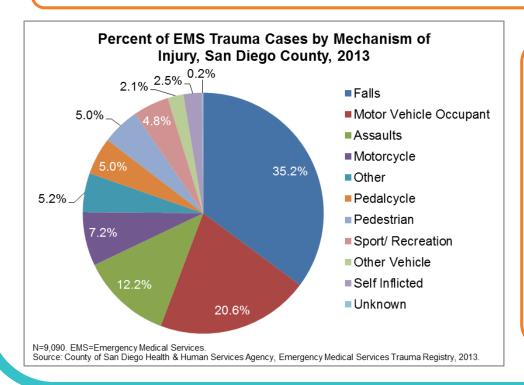
In 2013, the number of EMS transported Ischemic Stroke cases arriving in under four hours from the last time the patient was known to be well increased by 10.8% from 2012.

In 2013,
47.5% of the
EMS
transported
Ischemic
Stroke cases
arrived at a
Stroke
Receiving
Center within
4 hours of
the last time
the patient
was known
to be well.

### **Prehospital System Overview - Trauma**



Similar to 2012, 9,091 trauma cases were transported to a Trauma Center via EMS in 2013. The distribution of trauma patients transported by EMS among the Trauma Centers ranged from 6.2% to 25.8%.



In 2013, more than one third of EMS transported trauma cases were due to a fall. The second most common mechanism of injury was the result of being a motor vehicle occupant.

#### **EMS SYSTEM REPORT**

### **COUNTY OF SAN DIEGO EMERGENCY MEDICAL SERVICES**

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#### **MISSION STATEMENT**

Emergency Medical Services (EMS) ensures that emergency medical services, including 9-1-1 ambulance services, and trauma care services are of the highest quality. EMS also provides services in two ambulance districts and is involved in community education, prevention and research projects.

### **DID YOU KNOW?**

A Branch of the County of San Diego Health and Human Services Agency, Emergency Medical Services (EMS) coordinates the activities of prehospital, trauma center and specialty service center providers for all residents and visitors of San Diego. The Branch has been designated as the County's "local EMS agency" (LEMSA) pursuant of the Health and Safety Code, and serves as the primary regulatory agency for the local EMS system. In addition, EMS has twelve different programs ranging from Disaster Medical Services to Automated External Defibrillators (AEDs).

#### **EMS Programs**

- County Service Area Administration
- Base Hospital and Specialty Care **Systems**
- Prehospital System Operations
- Prehospital System Emergency Medical Personnel
- Automated External Defibrillator (AED) Health Emergency Preparedness **Program**

- Sexual Assault Response Team Program
- Epidemiology and Surveillance
- **Community Health Statistics**
- Information Communications, Systems and Technologies
- **Disaster Medical Services**
- Community Health Preparedness